

Mother and Child Interactions About the Mother's Breast Cancer: An Interview Study

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Purpose/Objectives: To describe mothers' reported methods of interacting with the mothers' school-age children about their breast cancer.

Design: Qualitative.

Setting/Sample: 19 mothers newly diagnosed with breast cancer. Mothers received treatment for their illness in the Pacific Northwest. Mothers had at least one child between 7 and 12 years old at the time of diagnosis.

Methods: Case-intensive, in-home, semistructured interviews were audiotaped, transcribed, and inductively coded into four conceptual domains and 16 categories of behavioral strategies used by the mothers to interact with their children about the breast cancer.

Main Research Variables: Behavioral strategies used by mothers when interacting with the children about the breast cancer and when providing children with support.

Findings: Mothers used a number of methods to bring children into the mothers' breast cancer experience. The conceptual domains included talking about the breast cancer, explaining treatment and care, providing experiences, and doing things to help children cope.

Conclusions: The dominant pattern in the interview data was for mothers to assume a teacher/educator role with the children about the cancer, not an interactive, emotive-expressive parenting role. Most mothers used technical biomedical language; did not give evidence of systematically checking on the children's understanding of what they were told; did not elicit the children's concerns; and exposed the children to emotionally laden or potentially frightening images, words, or experiences.

Implications for Nursing Practice: Programs and materials need to be developed that help mothers work from a model of parenting that includes developmentally appropriate language, facilitates the children's expression of questions and feelings, links the mothers with the children's understanding of the illness, and assists the children to better manage what is happening related to the breast cancer.

Key Points . . .

- ▶ Mothers of school-age children face unique dilemmas when they need to explain to those children about a diagnosis of breast cancer and the necessary treatment.
- ▶ Mothers employ a number of cognitive and behavioral strategies to help their school-age children cope.
- ▶ School-age children might not be able to comfortably handle large amounts of information about their mother's breast cancer, especially if it is not delivered in an age- or developmentally appropriate manner.
- ▶ Mothers of school-age children may need specific intervention to help them explain their diagnosis and treatment in a way that does not create more problems for the child.

1994; Compas et al., 1994; Lewis, Zahlis, Shands, Sinheimer, & Hammond, 1996; Welch, Wadsworth, & Compas, 1996; Wellisch, Gritz, Schain, Wang, & Siau, 1991, 1992); the relationship between the mothers' illness and the children's level of psychosocial functioning (Lewis & Hammond, 1992, 1996; Lewis et al., 1989, 1993); the functioning of children of single compared to married mothers with breast cancer (Lewis et al., 1996); the mothers' reports of children's difficulties with the illness (Hymovich, 1993; Lichtman et al., 1984); the mothers' reports of changes in the mother-child relationship after breast cancer (Lichtman et al.); and the children's reports of what the illness is like for them (Issel, Ersek, & Lewis, 1990; Wellisch et al., 1991, 1992).

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School-age children of mothers with breast cancer are affected by their mothers' illness. This claim is not debatable. Studies have documented the processes within the family system through which children are affected by the mothers' breast cancer (Lewis & Hammond, 1992, 1996; Lewis, Hammond, & Woods, 1993; Lewis, Woods, Hough, & Bensley, 1989); the level of psychosocial functioning of children compared to referent samples or to children of healthy mothers (Armsden & Lewis,